

HB 25-1309: PROTECT ACCESS TO GENDER-AFFIRMING HEALTH CARE

Prime Sponsors:

Rep. Brown; Titone Sen. Cutter; Gonzales J.

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Fiscal note status: This revised fiscal note is provided pursuant to Senate Rule 25(e) and reflects the

amendment adopted by the Senate Health and Human Services Committee.

Summary Information

Overview. The bill codifies gender affirming care coverage in state law and exempts testosterone prescriptions from select tracking requirements.

Types of impacts. The bill is projected to affect the following areas on an ongoing basis:

Minimal State Workload

State Revenue

Appropriations. No appropriation is required.

Table 1 State Fiscal Impacts

	Budget Year	Out Year
Type of Impact	FY 2025-26	FY 2026-27
State Revenue	\$0	\$0
State Expenditures	\$0	\$0
Transferred Funds	\$0	\$0
Change in TABOR Refunds	\$0	\$0
Change in State FTE	0.0 FTE	0.0 FTE

Summary of Legislation

The bill codifies coverage for gender affirming care in state law for state-regulated health plans. Additionally, under current law, testosterone prescriptions are tracked through the Prescription Drug Monitoring Program. The bill requires the program to block all such entries from view once the prescription is archived.

Finally, the bill allows the Health Insurance Affordability Enterprise (the enterprise) to accept gift, grants, and donations for the purpose of ensuring that Coloradans have access to legally protected health-care activities.

Background and Assumptions

Private Insurance

Under the Affordable Care Act, any mandated benefit created in state law beyond what is considered an essential health benefit is subject to state defrayal, meaning the state is required to pay for the additional costs incurred by insurers to provide the benefit.

In October 2021, the U.S. Center for Medicare and Medicaid Services (CMS) <u>approved gender</u> <u>affirming care</u> as an essential health benefit in Colorado. The fiscal note assumes that gender affirming care does not require a state defrayal based on current law and policy. However, in March 2025, CMS issued a <u>proposed rule</u> that would prohibit coverage of gender affirming care as an essential health benefit. If the rule is enacted, its effect on previously approved essential health benefit is not known.

Children's Health Plan Plus

The Department of Health Care Policy and Financing's (HCPF) operates the Children's Health Plan Plus (CHP+), which provides subsidized access to health insurance coverage to children and persons who are pregnant or have recently given birth. CHP+ currently receives federal funds to cover gender affirming care. As result of Executive Order 14168, issued in January 2025, this federal funding may cease. The fiscal note assumes that HCPF will continue to provide coverage for these services whether or not they receive federal funds and whether or not this bill passes. If additional funding is required based future changes in federal practices, it will be addressed through the budget process.

State Revenue

The bill may increase state revenue to the Health Insurance Affordability Cash Fund from gifts, grants, or donations; however, no sources have been identified at this time. Gifts, grants, and donations are exempt from TABOR revenue limits.

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State Expenditures

Gender affirming is currently an essential health benefit in Colorado and the Department of Regulatory Agencies (DORA), the Department of Personnel (DPA), and HCPF already incur the cost of ensuring coverage under state-regulated health insurance plans, state employee health plans, and CHP+, respectively. Thus, there is no fiscal impact from the coverage requirement in the bill.

Workload will minimally increase in DORA to adjust the Prescription Drug Monitoring Program as required by the bill. This work can be accomplished within existing resources.

To the extent that gifts, grants, and donations are received, expenditures in the Health Insurance Affordability Enterprise will increase. Potential expenditures may include administrative costs to establish a program to ensure that Coloradans have access to legally protected health-care activities, as well as service costs. Potential expenditures have not been estimate and will depend on the receipt of gifts, grant, or donations.

Effective Date

The bill takes effect upon signature of the Governor, or upon becoming law without his signature.

State and Local Government Contacts

Health Care Policy and Financing

Regulatory Agencies

Personnel